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Re: Health in East Timor

EAST TIMOR

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I came to East Timor as a tourist in September 1991. I had been concerned with the independence of East Timor already in the 1970s as part of my work in the Vietnam Solidarity Movement, and I came into contact with the Salesians - a Catholic order working also in East Timor - by chance through a charity that is working in my region. I decided to extend my holiday trip to Bali and take a 10-day excursion to East Timor. On my arrival in Dili, I was met by two Salesian Sisters who received me and my travel companion very cordially, gave us accommodation for a whole week and treated us like members of the family. On the very day of our arrival we drove with Sister P. to Venilale, which is a fairly large village in the middle of the mountains. I could already see some of the country's main problems: forest areas are cleared out, the soil is widely eroded, villages along the big roads are poor, with people living in often ramshackle huts made out of natural materials giving them a poor quality of shelter, Evidence of military activity is wide- spread - ruined stoneblock houses, graveyards, police posts, heavy weapons and tank tracks on the roads. Soldiers are seen everywhere. With heavy weapons, they patrol in groups, in markets, in the villages, searching vehicles on the roads, driving trucks recklessly on the narrow mountain roads - more than once we were nearly forced over the edge by military cars. Indonesian soldiers are armed with modern automatic weapons, while soldiers of Timorese appearance carry old guns. The whole country gives the impression of being under occupation.

Moreover, the large number of graveyards is impressive, and inspection of the dates of deaths shows that most people had died within the last 15 years. Independent witnesses estimate that more than 200,000 people have died within the last 16 years through murder, undernourishment or disease, directly or indirectly as a consequence of the Indonesian invasion.

We were based in rooms in Venilale from where we visited Fatumaca, Lospalos and Baucau. For two afternoons I took part in the outdoor clinic in Venilale, and on one half-day I accompanied Sister P. to Badumory, a small village where she holds an outdoor clinic once a week. I visited the Puskesmas, that is the health service of the Indonesian government, in Venilale. I saw a malaria screening session in a school and had a long discussion with the doctor of the Puskesmas, who enabled me to visit the hospital at Baucau where I spoke at length with the physicians. I visited Fatumaka and took part in a surgery in a village nearby with the orderly of the outpatient unit. In Lospalos I visited the outpatient unit and met the Canossa Sisters working there. I also saw the schools of the

Salesians in Lospalos and made a brief visit to the agricultural school in Fuiloro. Everywhere I went I was heartily welcomed, asked to give my opinion on medical matters and taken on house calls in the villages.

My impression is that the standard of health among the Timorese is very poor and the measures being taken by the Indonesian government are having no impact on the cycle of poverty, numbers of children being born, malnourishment and illness. Especially after the events at the end of last year, the feeling remains that, on the contrary, for the Indonesian government, a solution that includes the death of a large number of people, whether by disease or direct intervention, is on the whole acceptable. Although rudimentary, church facilities seem to offer the best basis for bringing about effective change and improvement for the population in this part of the world at the moment.

>>> Civil Rights Abuses

Obviously the health situation cannot be divorced from the political context of the country. Everywhere in East Timor the people are longing for their independence as much today as they were 16 years ago. This wish is openly expressed again and again at the greatest possible risk. The sole answer the Indonesian government had for this was violence.

Of course local people cannot forget the forced military occupation of their country - every family has its dead and injured to remember. And the army continues to control the country through terror. Spying, house searches and killings are everyday occurrences, and from time to time people disappear. The Hotel Flamboyant in Baucau has been partly converted into an interrogation and torture centre, The presence of the International Committee of the Red Cross (ICRC), with the special task of monitoring conditions of detained political prisoners, testifies to the truth of these assertions. The work of this organisation is permanently and systematically handicapped; for example, after the massacre of November 1991, ICRC members could not visit the detained prisoners for many days on the pretext that they would interfere with the interrogations.

I was shown many examples of violence. Mr Aleixio Ximenes, elected president of the Baucau parliament, member of UDT and convinced of the need of national independence informed me that only two weeks before my arrival the military had been behind a plot to have him assassinated that even the Timorese employed by the Indonesian government are spied on and treated as second class citizens - giving them an even greater interest in seeing an independent East Timor. It comes therefore as no surprise that local people are suspicious of all government-led projects such as immunization programmes or agricultural projects. Who wants to take advice when the adviser is an Indonesian soldier with a rifle in his hand?

The Indonesian government has used the army to destroy villages and forcibly remove people, the idea being that they resettle along roadsides where control is easier. Many had to leave the terraced and irrigated fields now left derelict. They all remember forced early

morning roll-calls at times when they had to go to field work, and even today from time to time people disappear from field work and never come back. How could anyone imagine that the peasants of East Timor will accept lessons in agriculture and construction from these same soldiers?

The local military command has forbidden villagers to provide food and clothing for their relations in Fretilin when they come back from the forests at night, and civil servants are supposed to report any such contacts being made. Methods of forcing people to denunciation are multiple and violent. They offer money or threaten their lives, and very often these threats have been carried out. So there are many spies. How can these civil servants expect to launch successful immunization campaigns and have their advice followed, still less be accepted as friends?

In contrast, the Catholic Church has credibility among the Timorese. The church has always been neutral and in its defence of the rights of the individuals has even found itself in the firing line. Even today in church-run schools many pupils are the children of Fretilin members, but the priests do not exclude them on that account. Schools run by the church are also better than those run by the government. They are built solidly and offer a broadly- based education. Government schools, on the contrary, seem to be a sham. Pupils do not have books but learn by rote. The final results in East Timor government schools are below Indonesian standards.

After the invasion, the Indonesians had killed nearly 311 the Timorese teachers who had begun to build up an education system. Then they sent Indonesians as teachers to Timor, who could not speak the native language, and pupils have to learn Bahasa Indonesia nowadays. In a village school in Venilale thai I visited there were four classrooms, very dark, with benches and tables and about 60 children in every classroom, all of them small and thin. I did not see a single book. The children owned copy-books with the letters crooked, obviously copied without any system. I was told repeatedly that children have great difficulty in following the lessons; because of their malnutrition they cannot concentrate for long.

The large number of adults murdered or disappeared in jail or elsewhere has led to an extremely high number of orphans. Some have to be fed by their relatives, impairing their living conditions, others are brought up in the continuously growing church orphanages.

>>> Agriculture and Nutrition

Agriculture on the meagre soils of East Timor was always based on traditional methods; the plough was unknown and the soil was broken up by letting water buffaloes trample over the fields, or by digging sticks. But because of the favourable climate and well organized village structures, food supply in the villages was sufficient in the past; a good variety of edible plants was available. But now the effects of forced moves have left fields uncultivated, and the scorched earth tactics of the Indonesian army have led to deforestation and erosion. As a result of militaryy actions and intimidation the inhabitants

were prevented from working in the fields. New fields worked by the old methods brought insufficient harvest. The male members from many families have fled to work in the resistance or are in jail or murdered. Knowledge cannot be transmitted. A whole new generation has grown up under war conditions and much knowledge seems to be lost.

Even if peasants can grow enough food for their own needs, some of it has to be sold on the market to pay for shoes, clothing and other essentials. Small, undernourished and ill-looking women are seen in the markets in East Timor selling a few maize cobs or sweet potatoes or a chicken.

There is a very low level of knowledge about nutrition and good practice in preparation of food. The staple diet consists of a maize porridge or plain rice' with no vegetables or meat. There are very few cows on the is and so that very little milk is available. Breastfeeding is the only source of infant food, and if the mother is unable to produce enough milk her infant will die or become, while undernourished, vulnerable to infections.

>>> Health Problems

The well-known problems of a Third World country are complicated by the special conditions in East Timor, resulting from its political situation and the predominant customs. The two fundamental problems are malnourishment and lack of hygiene. The most prevalent diseases are tuberculosis, endemic malaria, pneumonia, parasitic infestations, skin infections and severe anaemia, especially in children and women after many childbirths, and are related to undernutrition. Tuberculosis is widespread and the under-nourished Timorese are easy victims. Within three days in the outdoor clinics I saw at least 20 cases of severe lymph node tuberculosis, some with abscesses, and several women with severe cavitation of the lung. Tuberculosis is commonly transmitted from mother to child, and entire families have been wiped out; I have seen a family consisting of five children between two and 13 years who had recently lost their parents through this disease. Three of the children were also very ill, infected with the condition, as probably were the other two. Two more sisters had been in Baucau hospital for a week for their TB treatment. Parasites and skin infections are the results of poor awareness of hygiene. The simple grass huts standing on the bare soil are crawling with insects and all animals of the region have free access. People who have been forcibly resettled are less likely to build their huts on stilts, the traditional way of construction, giving some protection against vermin. Today domestic animals run through the open huts, there are no toilets and hardly any running water, children have to be raised without nappies, leading to the spread of parasites through animal and human faeces.

Child mortality is high. I saw one mother breastfeeding her second living newborn child; she had lost five other children within their first year of life. The women are tired out at 30 after multiple pregnancies, and easily become victims to tuberculosis. There is no gynaecological support. Birth takes place at home with ancient and often unhealthy customs. One of these is to burn an open fire in the hut of a parturient woman until the child is four weeks old. The newborn child is not dressed during this time. As the huts

have no chimney, mother and child are sitting the whole time in dense smoke which damages the sensitive lungs of the newborn. A midwife is only called if there are complications in the birth, If a hospital stay is needed it is very difficult to transport the women there because of the bad conditions of the roads, and even in hospital too often there is no help. There are many eye infections in children, some of which can lead to blindness.

>>> Health Facilities

There is a large hospital in Dili, capital of East Timor, which I could not visit but which has a good reputation. Several medical specialists practise in Dili. There is another hospital in Baucau and a smaller one in Los Palos.

At the time of my visit, Baucau hospital had three working doctors, two of whom were Indonesian students sent over by the government for two years to do their internship, not fully trained and lacking experience. One of them is also responsible for the local Puskesmas. There is also supposed to be a paediatrician, whom I did not meet, and also a dentist. The dentist is said to extract teeth because there is no time or material to make fillings and therefore people are afraid of going there and go very late.

The hospital buildings are situated on a large sector of ground, They are new but poorly equipped and managed. Everything is in short supply. Starting with the food, I was told that the hospital kitchen would supply all patients with food of first or second standard. But the kitchen was out of food at 11 a.m., a single rice pot was cooking, and family members of many patients were cooking meals on campfires at the back of the buildings.

Hygiene is abysmal, the wash-room, if existent, is often dirty, bedsteads corroded. Patients with tuberculosis were only separated from surgical patients by a curtain, although at the time of my visit the hospital was not full. I saw incorrectly applied plaster casts. The treatment of seriously ill patients is made impossible by lack of equipment (bladder catheters, nasogastric tubes, artificial nutrition, disposable materials). Medical supplies are only delivered every three months, always less than required. Infusions are in short supply and cannot be produced locally, The surgical emergency room was very dirty with a single, faulty AMBU bag. The operating theatre was equipped with the basic necessities but was unhygienic. There was a modern anaesthetic breathing machine that could not be used because anaesthetic gases (nitrous oxide and halothane) were not available; anaesthesia is performed with an ancient ether evaporator, if oxygen, that has to be delivered from Dili, is available. During my visit I was told that the oxygen supply was interrupted because the oxygen filling machine in Dili was broken. Only a few basic laboratory tests are possible, fewer than are found in the average practice at home.
Blood for transfusion has to be brought in from Dili (6 hours' drive away), so that urgent transfusions are impossible. Blood grouping and matching is inadequate, and the Rhesus factor cannot be cross-matched. This did not seem to disturb the doctors much, as they estimated only 10 per cent of the Indonesian population to be rhesus negative!

It has to be said that although the doctors are inexperienced and overtaxed under the stress of the conditions, they are certainly willing and enthusiastic. Obviously this description would not be out of place in many Third World countries, but the frustrating fact is that Baucau Hospital has the potential but is being neglected. The wards are half empty although there is no shortage of patients. The Puskesmas, established by the Indonesian government in every largish town, only cover some 30 per cent of the health care needed, and 70 per cent of their work is concentrated on organizing campaigns for the early detection of malaria, tuberculosis, vaccination, prevention of infections, advice on nutrition, family planning and so on. As already noted, Indonesian students are working as doctors doing their internship, working independently without medical supervision but under the control of the military. They are offered inducements to work in Timor and even higher incentives if they stay on once here. They do not speak Tetum, the language most spoken in Timor, and have hardly any practical experience. They do not have the supplies for an adequate service, and sometimes the Puskesmas doctors in Venilale have to ask the Sisters for antibiotics. In some cases the local people were too suspicious to take drugs prescribed for them by the Puskesmas. Some of the Puskesmas can perform simple laboratory checks such as haemoglobin. Hundreds of people go to the very committed church health workers in the weekly outdoor clinics and surgeries, and mostly, they follow the Sisters' advice. But they are overtaxed and their work is a drop in the ocean. There are some experienced workers among them, but most are semi-skilled. Very little diagnostic work can be undertaken, and diagnosis is mainly based on verbal complaints from the patients. Even a superficial physical checkup is impossible in the middle of the masses of patients and with no privacy. Sometimes antibiotics are given for 'safety's sake', often with too low a dosage to cause resistance. Some medicines, such as eyedrops or eardrops, are completely lacking in the surgeries. The best conditions I found were in the church-run surgery in Los Palos. There is a quiet examination room, registry, a corner for administering injections and bandages, and a dispensary. In Venilale there is one small room without electric light, but at least there are some sanitary facilities and an examination bed, divided from the rest of the room by a curtain. There are plans to convert an old Red Cross building which was commandeered by the army into a small clinic with some beds, so that patients living far away can stay for some days. A Timorese nurse will be returning from her training in the Philippines to take charge of this project which, it is hoped, will be completed in about one year's time. The outpatient room at Fatumaka is even darker and worse equipped. The Salesians are planning a hospital at Suaai with 50 beds, and the Sister (not a Salesian) who will be supervising this, had just arrived the day I left Timor.

There have been complaints that the drugs manufactured in Indonesia perform very poorly in comparison to those smuggled in from the West, and that those supplied on state prescription have no noticeable effect. I have brought back some samples bought in pharmacies and had them analysed in a well-known laboratory. The contents were identical with those declared or the label,

Visits by doctors from abroad are very welcome. They are lodged for : month at a time if they are willing to share in the work of the health teams and advise and train health

workers. Such a stay can be a very important experience for any young doctor, and is a useful support even if it does not change the situation entirely.

>>> The Need for Change

A change in the situation can only take place on the political level. As long as the suppression of the people in East Timor continues - and there is no sign of a change - so people will go on dying from undernourishment and curable diseases, and nothing will improve. Even the wish for independence, however expressed, is a revolution against state doctrine according to the Indonesian government and is uncompromisingly persecuted. The independent existence of the military apparatus within the Indonesian state is furthermore a guarantee of uncontrollable violence and tyranny throughout the country. In this connection world-wide action is required. We cannot permit the rearmament of Indonesia with modern Western weapons systems for them to be brought into action against the people of East Timor, Recently, the German government has decided to send weapons, including 39 warships, from the armed forces of former Eastern Germany to Indonesia. This must be most strongly condemned!

>>>Bibliography

Amnesty International publications, December 1991 - July 1992.
Araujo A. Ost Timor, Die Loricos singen wieder. Albatros Verlag, Reihe Asien astuell; 1978.

Tapol. Bulletins nos. 111-112, 111 Northwood Road, Surrey CR7 8 HW.

References 1. Ludwig, K. Osttimor, das vergessene Sterben. Reihe bedrohte Volker, pogrom Taschenbucher 1013, 1985.

2. Frankfurter Rundschau, 24 July, 1992. (Accepted 26 January 1993)

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